

Agenda Item Form

Agenda Date: 04/20/04

Districts Affected: #5

Dept. Head/Contact Information: Parks & Recreation Department, Dr. Norman Merrifield, 541-4331

Type of Agenda Item:

- | | | |
|---|--|--|
| <input type="checkbox"/> Resolution | <input checked="" type="checkbox"/> Staffing Table Changes | <input type="checkbox"/> Board Appointments |
| <input type="checkbox"/> Tax Installment Agreements | <input type="checkbox"/> Tax Refunds | <input type="checkbox"/> Donations |
| <input type="checkbox"/> RFP/ BID/ Best Value Procurement | <input type="checkbox"/> Budget Transfer | <input type="checkbox"/> Item Placed by Citizen |
| <input type="checkbox"/> Application for Facility Use | <input type="checkbox"/> Bldg. Permits/Inspection | <input type="checkbox"/> Introduction of Ordinance |
| <input type="checkbox"/> Interlocal Agreements | <input type="checkbox"/> Contract/Lease Agreement | <input type="checkbox"/> Grant Application |
| <input type="checkbox"/> Other _____ | | |

Funding Source:

- ☒ General Fund
☐ Grant (duration of funds: _____ Months)
☐ Other Source: _____

Legal:

☐ Legal Review Required Attorney Assigned (please scroll down): None ☐ Approved ☐ Denied

Timeline Priority: ☒ High ☐ Medium ☐ Low # of days: _____

Why is this item necessary:

Staffing Table Change will provide staff for the new Eastwood Recreation Center.

Explain Costs, including ongoing maintenance and operating expenditures, or Cost Savings:

Salaries to be appropriated in GF budget.

Statutory or Citizen Concerns:

Demand and needs are met

Departmental Concerns:

These positions enable the department to fulfill the needs of providing recreational and social services to the citizens at the new Eastwood Recreation Center and also to meet the department's missions, functions and objectives.

SO OT 144 541 4331 1002
CITY CLERK DEPARTMENT

DATE: _

APR 13 2004

CITY OF EL PASO
STAFFING TABLE CHANGE REQUEST

Date sent to City Council: _____

INITIALS

2004-55

DEPARTMENT NAME: Parks and Recreation	(1) HR DEPARTMENT ID PR	(2) ATTACHED DOCUMENTATION <input type="checkbox"/> Description of Duties <input type="checkbox"/> Organization Chart	Date sent to Personnel: REQUESTED EFFECTIVE DATE: ASAP
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A=add

D=delete

A/D	# OF POS	Max Head Count	Business Unit	(6) ACTIONS ACCOUNT DESCRIPTION and ACCOUNT CODE Fin. Dept. ID-Fund-Fin. Loc. Proj. or Grnt. (00000000-00000-00000PorG0000)	JOB CODE	*-Position Type	PLAN GRADE	R/T/C	L/U
A	1	26	COFEP	51010216-01101-31010	5193	Recreation Services Coord	75	R	L
A	11	26	COFEP	51010216-01101-31010	9631	Recreation Specialist	17	R	L
			COFEP						
			COFEP						
			COFEP						
			COFEP						
			COFEP						
			COFEP						

RECEIVED

MAR 15 2004

FINANCIAL SERVICES

(7) Purpose: ☐ Streamline ☐ Expanded Program ☐ New Program ☒ New Facility ☐ Other (Explain)

(8) STATEMENT OF NEED / CONSEQUENCES OF NOT APPROVING ACTION(S):

To staff the new Eastwood Recreation Center

ANTICIPATED IMPACT ON:

(9) DEPARTMENT ORGANIZATION/OPERATIONS

(10) DEPARTMENT BUDGET

(11) DEPARTMENT HEAD SIGNATURE:

DATE:

BUDGET CHANGE

☐ Required ☐ Attached

AMOUNT ADDITIONAL FUNDS

PERSONNEL DEPARTMENT RECOMMENDATION

☒ Requested CC and CG is Appropriate☐ Change Class To☐ Change Grade To

COMMENTS

PERSONNEL DIRECTOR

DATE

O.M.B RECOMMENDATION / C.A.O. APPROVAL

COMMENTS:

OK! David A. Smith 4-5-04

RECOMMENDATION

☒ Position(s) Recommended☐ Position(s) Not Recommended

CHIEF FINANCIAL OFFICER

CHIEF ADMINISTRATIVE OFFICER

APPROVED:

DATE